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FAX NUMBER 17038729306

FROM Thomas M. Isaacson

DATE 2004-06-25 21:07:29 GMT

RE Application No. 09/314,637; Group Art Uni. 2654

COVER MESSAGE

**Examiner: A. Armstrong
Inventor: M. Rahim
Filing Date: May 19, 1999
Attorney Docket: 113607**

Dear Sirs:

Please find attached an Amendment in the above-referenced case in Response to a Notice of Non-Compliance.

Respectfully Submitted,

The Law Office of Thomas M. Isaacson


PTC/SB/21 (08-03)

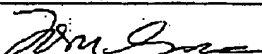
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/314,537
	Filing Date	May 19, 1999
	First-Named Inventor	Mazin G. Rahim
	Art Unit	2654
	Examiner Name	Angela A. Armstrong
Total Number of Pages In This Submission	Attorney Docket Number	113607

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Thomas M. Isaacson, Reg. No. 44166	
Signature		
Date	June 25, 2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Thomas M. Isaacson	
Signature		Date: June 25, 2004

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In re Application of:	:
	:
Rahim et al.	: Attorney Ref.: 113607
	:
Serial No.: 09/314,637	: Confirmation No.: 5478
	:
Filed: May 19, 1999	: Art Unit: 2654
	:
FOR: RECOGNIZING THE NUMERIC	: Examiner: Angela Armstrong
LANGUAGE IN NATURAL SPOKEN	:
DIALOGUE	:

RESPONSE

MAIL STOP: Non-Fee Amendment
Commissioner for Patents
Patent & Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Responsive to the communication dated May 27, 2004, kindly consider the following
Amendment and Remarks.

Amendments to the claims begin on page 2.